

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)

Attorney's Docket Number:
6248.200-US

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Composition for IVF

The specification of which (check only one item below):

- ☐ is attached hereto
☒ was filed as United States application

Application No. To be assigned

on February 5, 2002

and was amended

on _____

☐ was filed as PCT international application

Number _____

on _____

and was amended under PCT Article 19

on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign application(s) for patent or inventor's certificate or of any PCT international applications(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL/FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicated "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119	
Denmark	PA 2001 00189	6 February 2001	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
Denmark	PA 2001 00382	8 March 2001	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
U.S.A.	60/273,162	2 March 2001	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO

6248.200-US

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT
UNDER 35 U.S.C. 120.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.			
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Reg. No. 38,475	Reg No 43,228	Reg No. 36,459	

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(212) 867-0123

2 of 3

Variable	Mean	SD	Min	Max
Age	38.5	12.5	25	65
Gender	Male	Female		
Marital status	Married	Single		
Education	High school	College		
Occupation	Manager	Worker		
Income	Low	High		
Health status	Good	Poor		
Stress level	Low	High		
Life satisfaction	Low	High		
Resilience	Low	High		
Optimism	Low	High		
Self-efficacy	Low	High		
Perceived stress	Low	High		
Depression	Low	High		
Anxiety	Low	High		
Quality of life	Low	High		
Health-related quality of life	Low	High		
Physical health	Low	High		
Mental health	Low	High		
Social health	Low	High		
Environmental health	Low	High		
Overall health	Low	High		

10062224-020502

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)				Attorney's Docket Number: 6248.200-US	
5	Full Name of Inventor	Family Name	First Given Name		Second Given Name
	Residence & Citizenship	City	State or Foreign Country		Country of Citizenship
	Post Office Address	Post Office Address	City		State & Zip Code/Country
6	Full Name of Inventor	Family Name	First Given Name		Second Given Name
	Residence & Citizenship	City	State or Foreign Country		Country of Citizenship
	Post Office Address	Post Office Address	City		State & Zip Code/Country
7	Full Name of Inventor	Family Name	First Given Name		Second Given Name
	Residence & Citizenship	City	State or Foreign Country		Country of Citizenship
	Post Office Address	Post Office Address	City		State & Zip Code/Country
8	Full Name of Inventor	Family Name	First Given Name		Second Given Name
	Residence & Citizenship	City	State or Foreign Country		Country of Citizenship
	Post Office Address	Post Office Address	City		State & Zip Code/Country
9	Full Name of Inventor	Family Name	First Given Name		Second Given Name
	Residence & Citizenship	City	State or Foreign Country		Country of Citizenship
	Post Office Address	Post Office Address	City		State & Zip Code/Country
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>					
Signature of Inventor 1		Signature of Inventor 2		Signature of Inventor 3	
Date		Date		Date	
Signature of Inventor 4		Signature of Inventor 5		Signature of Inventor 6	
Date		Date		Date	
Signature of Inventor 7		Signature of Inventor 8		Signature of Inventor 9	
Date		Date		Date	